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#### **DECLARATION AND POWER OF ATTORNEY** FOR PATENT APPLICATION

AIIORNEY	DOCKET	NO.	10002273-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and

patent is sought on the	inventio	on entitled:		ch is claimed and for which a		
mproved Reliability And	Pertor	mance Of SNIMP Status	Through Protocol vvi	th Reliability Limitations		
the specification of whi	ich ie at	tached hereto unless th	e following box is che	ackad:		
•			•			
( ) was filed on Number	and v	as US Applic vas amended on	cation Serial No. or PC (if ap	T International Application plicable).		
	s amen	ded by any amendmen	nt(s) referred to above	above-identified specification, e. I acknowledge the duty to FR 1.56.		
Foreign Application(s) and/or	Foreign Application(s) and/or Claim of Foreign Priority					
	elow and	have also identified below a	ny foreign application for pa	nny foreign application(s) for patent or atent or inventor(s) certificate having a		
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U S C. 119		
				YES NO		
	-			YES. NO.		
Provisional Application						
• • •	nder Title	35, United States Code Sec	ction 119(e) of any United	States provisional application(s) listed		
	AP	PLICATION SERIAL NUMBER	FILING DATE			
	-			<del>- </del>		
U. S. Priority Claim						
insofar as the subject matter manner provided by the first	r of each paragrap e 37, Cod	of the claims of this applica oh of Title 35, United States de of Federal Regulations, Se	ation is not disclosed in the s Code Section 112, I ackr ection 1.56(a) which occurr	States application(s) listed below and, e prior United States application in the lowledge the duty to disclose material red between the filing date of the prior		
APPLICATION SERIAL NUMBER FILING DAT		FILING DATE	STATUS (patented/pending/abandoned)			

#### POWER OF ATTORNEY:

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

> Place Customer 022879 **Customer Number** Number Bar Code Label here

Send Correspondence to: **HEWLETT-PACKARD COMPANY** Intellectual Property Administration P.O. Box 272400 Fort Collins, Colorado 80527-2400 Direct Telephone Calls To:

James R. McDaniel (208) 396-4095

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor:	Ernest F. Covelli	Citizenship: US
Residence:	688 Palmetto Dr., Eagle, ID 83616	
Post Office Address:	Same as residence	
Einest	F Corr la	2/1/01
Inventor's Signature		Date

# The state of the s

### DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10002273-1

Full Name of # 2 joint inventor:	Robert J. Madril, Jr.		Citizenship: US
Residence:	695 Sawtooth Ave., Boise, ID 83	3709	1988 W ALHANCE CT. BOISE, ID8371
Post Office Address:	Same as Residence		
Inventor's Signature	w.	Date	24-2001
Full Name of # 3 joint inventor:	Matt Howell		Citizenship: US
Residence:	1708 N. 20th St., Boise, ID 837	702	
Post Office Address:	Same as residence		
Inventor's Signature	M	2/5 Date	5/2101
Full Name of # 4 joint inventor:	Steven Kolstad  3540 Curt Dr., Meridian, ID 836	<b>42</b>	Citizenship: US
Post Office Address:	Same as Residence		
Inventor's Signature	stod	Date /	1/24/2001
Full Name of # 5 joint inventor:	:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 6 joint inventor	:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 7 joint inventor	:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 8 joint inventor	:		Citizenship:
Residence:			
Post Office Address:	-		
Inventor's Signature		Data	